## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N99000000819

FILED Nov 04, 2009 Secretary of State

Entity Name: PROGRESSIVE MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

149 MANLEY RD WAUCHULA, FL 33873

Current Mailing Address: New Mailing Address:

P O BOX 913 P O BOX 1868

WAUCHULA, FL 33873 WAUCHULA, FL 33873

FEI Number: 65-0912839 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MURPHY, LILLIE MCRAY, JOANN 2055 N TURBOT RD 1575 MEADOW PO

2055 N TÚRBOT RD 1575 MÉADOW POND DRIVE AVON PARK, FL 33825 US BARTOW, FL 33834 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOANN MCRAY 11/04/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: T ( ) Delete Title: T (X) Change ( ) Addition

Name: HARDEN, SHELLIE A Name: HARDEN, SHELLIE A Address: 128 8TH ST W Address: 128 8TH ST W

City-St-Zip: ZOLFO SPRINGS, FL 33890 City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: CEO ( ) Delete Title: CEO (X) Change ( ) Addition Name: POWELL, ARTHUR JR Name: POWELL, ARTHUR JR

 Address:
 6820 N THATCHER AVE
 Address:
 6820 N THATCHER AVE

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:
 TAMPA, FL 33614 US

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 MURPHY, LILLIE
 Name:
 MCRAY, JOANN

 Address:
 2055 N TURBOT RD
 Address:
 1575 MEADOW POND

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 AVON PARK, FL 33825 US

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 NICHOLSON, DONALD
 Name:
 JACKSON, LEÓNARD

 Address:
 2409 LAREDO RD
 Address:
 609 WEST GRAPE ST

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 BOWLING, FL 33834 US

 Name:
 Name:
 LOUIS, BILLY M

 Address:
 Address:
 771 ALTMAN RD

 City-St-Zip:
 City-St-Zip:
 WAUCHULA, FL 33873 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BILLY M. LOUIS T 11/04/2009